



San Francisco Bay Regional Water Quality Control Board

ATTACHMENT G NOTICE OF TERMINATION

From Enrollment under the Conditional Waiver of Waste Discharge Requirements for
Grazing Operations in the Tomales Bay Watershed
(Resolution No. R2-2018-0046)

SECTION I. FACILITY OPERATOR INFORMATION

Name:		Contact E-mail:
Mailing Address:		
City:	State:	Zip Code:
Name of Contact Person:		Contact Phone:

SECTION II. LANDOWNER INFORMATION (IF OPERATOR IS NOT THE OWNER)

Name:		Contact E-mail:
Mailing Address:		
City:	State:	Zip Code:
Name of Contact Person:		Contact Phone:

SECTION III. FACILITY INFORMATION

Facility Name:		County:
Facility Address:		Contact E-mail:
City:	State:	Zip Code:
Name of Contact Person:		Contact Phone:

Mail signed form to:

San Francisco Bay Regional Water Quality Control Board
1515 Clay Street, Suite 1400
Oakland, CA 94612
ATTN: Grazing Waiver Program

Or email to: R2GrazingWaiver@waterboards.ca.gov